

# REPORT

OF THE

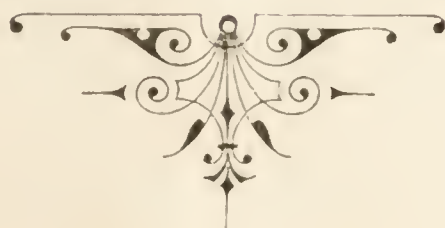
## Medical Officer of Health

TO THE

### GARSTANG


## RURAL DISTRICT COUNCIL

For the Year 1908.



GARSTANG :

H. Wrightson, Printer, Post Office.



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# Garstang Rural District Council.

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Annual Report for the Year ending December 31st, 1908.

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Gentlemen.

This is my twenty-sixth Annual Report and shows continued progress by you as a Public Health Authority.

The importance of your work becomes year by year more manifest, and although in rural districts the importance of sanitary work may not appear so important as in the towns, yet the latter have to look to the country for their real workers, strength of constitution and stamina.

The country districts year by year now show that they are the recruiting ground for the towns, and this in recent times has become more manifest.

Your work then must be of an important character, your efforts are directed to protect the child from its early birth to youth, manhood and old age.

The whole of your work is directed to this end by providing pure air, pure water, wholesome food, and healthy surroundings.

It seems to me quite possible that science is so advancing that it may eventually prove that all real disease is preventable and acquired, and man or woman ought not to die except by natural process of wear and tear which is known as the senile state, senility being a natural cause of death.

Your work then has a noble end, the Prevention of Disease, with all its subsequent troubles, pain, suffering, poverty, and death. Lack of health leads to lack of thought, often leading to intemperance and immorality.

Your work then is directed to acquire good and efficient water, fresh air, light, good and clean food, and the great problem is to acquire such in quantity with the least possible expenditure.

Scientific progress demands this, and legislation has placed you in authority to carry such out, you are the machinery to this end.

To create a strong man or woman you must grow the healthy child, by education, good fresh air, good wholesome water, and clean clothing, then there is a definite power at work to grow a healthy and strong nation.

I will now review the general work of your District during the past year :—

## **Purchase of an Infectious Hospital Site.**

This is one of your most important steps, and marks a distinct epoch in your history as a Public Health Authority.

You have purchased an admirable site, well situated, with good elevation, 111 feet above sea level, and in a lovely country in the township of Cabus, acreage 3 acres, 3 rood, 12 poles, price £550.



I consider the investment good and wise, and although your deliberations have been long and tedious your finality is good, and I congratulate you upon it.

The great question now arises what the nature and character of the buildings will be you intend to place upon this land. I will not in this report enter upon this subject, because as yet your Committee has not deliberated on this question.

The County Medical Officer has visited this site with me, and has expressed himself as being very pleased with the purchase.

I have also received a letter from him expressing his opinion as to nature and accommodation of the future buildings to be erected thereon.

I hope to bring this letter before you when your Special Infectious Hospital Committee meets to discuss this question.

I presume this will take place in the near future.

I should like to express the opinion that the Hospital, when erected, with its administrative department, may be a credit to your Council and worthy of the site on which it is to be placed, but above all, obtain the confidence of those who may be admitted within its walls, as well as those who may send patients near and dear to them to be under your treatment as a Public Health Authority.

For such a Hospital to confer its fullest benefit to the District in which it is situated, it should possess the fullest confidence of the public or it would be of little use, since you have no compulsory means of removal except under extraordinary circumstances.

### **Infectious Diseases.**

A total of 33 were notified, which is very satisfactory, and generally infection was kept well under control.

Diphtheria was the chief trouble, and at the end of 1907 had infected three different schools. By closing them, the free use of Antitoxin and disinfectants, the disease was soon under control and localized, no death resulting during the year.

One boy, whose sister died in 1907, had also diphtheria, he continued to have an abnormal amount of nasal discharge, and for a period of  $3\frac{1}{2}$  months this discharge gave the positive Bacteriological presence of the Diphtheria Bacillus. The danger of such a boy attending school is at once apparent.

I believe the greatest source of infection of this disease is the school, and being to a great extent a contact infection such as kissing, the using of another's pencil, the latter often placed by children in their mouths. In my opinion much good would arise, from an infectious point of view, if each child possessed his or her own school articles, and each a separate hook, with plenty of ventilation in a cloak room.

Schools are great sources of interchange for children, and should therefore possess every possible sanitary advantage including small, simple, yet efficient clean desks, adapted by position, construction and light, for the efficient mental and physical training of the child. A child passing through its present school training requires every advantage possible.

Bearing on this question of Infection, you have established some Isolation Hospital Areas, and also removed a few cases to Isolation Hospitals outside your own District, where it was impossible to deal with the cases.

The result has been good, but the expenditure heavy. The action taken was certainly the best under existing conditions. When your new Hospital becomes an accomplished fact you will be independent of both of these sources.

One case of Smallpox occurred in a Lodging House at Garstang, the case was removed to the Smallpox Isolation Hospital, Elswick. The case became rapidly complicated and died in three days after admission.

This man was inefficiently vaccinated, having only one small scar.

The case was of the semi-confluent type.

He was an Irish labourer who had been sleeping in outbuildings, with no fixed abode.

Being in a common lodging house there were many contacts, but all declined to be re-vaccinated or quarantined.

Stringent measures were as far as possible carried out, lodging house disinfected and closed, and there was no further case to my knowledge.

A comrade of this man was, I understand, indisposed, but I was not able to trace him. I believe he returned to Ireland.

The result of this outbreak was indeed fortunate under the circumstances, and no doubt early removal and disinfection conduced mostly to the disease not spreading.

### **Water Supply.**

This continues to receive your constant attention. It is one of the most pressing matters in your district.

The terms as at present charged are to a great extent prohibitive in your scattered Rural Area.

Pure water is a necessity for healthy human existence, and prohibition of acquiring such at a reasonable cost in a Rural District is indeed a calamity for both the population and animals.

Some progress is being made in Hambleton and Stalmine, yet owing to the cost objections and protests are made.

Pilling is much in want of good and wholesome water, and yet the cost would at present appear to be prohibitive.

I trust, however, a workable financial scheme may be here settled, for no township in your district, in my opinion, could possibly benefit more than that of Pilling.

For years, efforts made here have failed, yet water is urgently needed.

The water supply at Calder Vale is one of urgent and pressing importance, and I think your agreement with the Manchester Corporation for the Thirlmere supply will shortly be accomplished, this being at present before the Local Government Board.

The Townships of Myerscough and Bilsborrow would also benefit much from a wholesome water supply.



Your financial position to supply pure water throughout your Rural Area is not sound, and sooner or later I think you will find it necessary to more closely examine your position from this aspect.

More and more do I consider wells, as made in your district, a waste of money, and often traps for the production of disease. No wonder then that I am in favour of a general supply from a reliable source, which does not run the risk of local contamination.

Next to pure air comes the fundamental principle of pure water.

Both should be within easy reach of all, rich or poor. pure air and water are both their natural right, and fortunately to a great extent are natural productions, but unfortunately not so placed as to be near the dwellings of all.

In years past, and even now, the building of a dwelling is the first thought, the local conditions being secondary. Well may we ask is it wise in these enlightened times to build a house on a contaminated soil, with a bad subsoil water strata, endangering the future inhabitants of the dwelling?

The answer is clearly "No." The two points for any new dwelling are pure water and fresh air, the latter implies good drainage.

### **Milk.**

This important article of food has become a staple industry in your district, and I consider generally the farmers are realizing its importance.

I have not received a single complaint during the past year from any wholesale milk dealer buying in your district, nor am I aware of any prosecutions having been taken for adulteration.

Every farmer should now realize to milk with a clean coat, clean hands, with clean cows' udder, and tail, and clean utensils. Carrying out such, with a healthy animal to milk, his supply will comply with the ordinary regulations.

Most of the Urban and Borough Authorities are exercising their powers and will continue further to do so, and it behoves the Rural producer to be alive to the path of progress, and meet the demands of a more enlightened and progressive public.

Bearing upon this question, you have adopted the Modified Regulations of the Local Government Board of the Dairies and Cowsheds Order. Although such has been adopted by you, it is hardly fair to the existing owner and occupier that they should bear the brunt entirely of those regulations.

1.—To the tenant it means increased stringency of regulations all round with an increased labour bill.

2.—To the owner in many cases structural alterations, with an increased investment, and with what prospect of return?

I do not want in this report to discuss the financial aspect of farming from a milk producer's point of view, but I have no hesitation in saying that he is under paid, especially with the increased price of provender, now about 25 per cent. above the average.

The trend of legislation so far as agriculture is concerned on the

question of milk production, has been to handicap the farmer and owner, and give the public the benefit.

The importance of the Public Health aspect of this question can hardly be over estimated, and there is now, and justly so, a general outcry for pure and good milk, and to produce such it can only be done under the best possible conditions, which tell upon both the owner and occupier of land.

If legislation and a cultured public make demands, and such demands are considered just in their interests, then I think it is only right that a remunerative price should be paid for an article, which after all, is the cheapest food on the market, viz. :—Milk.

### **Soda Water.**

It would appear from recent investigations that the so called Soda Water, as supplied in syphons or bottles, may prove to be a source of danger.

This is proving to be the case in the City of London, and a compulsory system of registration is being enforced there, so that a pure article only may be supplied to the public.

Soda Water is extensively used not only by those in health but those suffering from disease, and consequently should be especially pure.

The public have a right to be supplied with an article which is of the nature and substance demanded. I feel sure more will be heard on this subject.

### **Drainage.**

Barnacre-with-Bonds.—Some good drainage work has been done here, and will, I have no doubt, encourage residential building in this locality,

Garstang.—There is a future proposal to treat the sewage of Garstang in conjunction with Barnacre-with-Bonds.

Plans are at present being prepared by the Inspector, with this object in view, or both separately.

Scorton, Nether Wyresdale.—A good sewer has been laid for this village, with septic tanks and bacteria beds. To complete the sanitary work here the recommendations of the Sanitary Inspector and your Committee require to be carried out, after which, I hope, a scavenging area may be defined amongst those actually receiving the benefit.

Scorton possesses most beautiful natural surroundings, and if desired, in my opinion, would become a residential neighbourhood, and given thorough sanitary conditions would be one of the healthiest localities situated in the Garstang Union.

Hambleton Sewerage.—This matter still stands in abeyance. Several schemes have been proposed since Dr. Reece's report in 1906, but as yet without any real result, and the drainage of this village has been before your Council for over a period of ten years.

Dr. Sergeant, the County Medical Officer, has taken a keen interest in this township, and in January last visited Hambleton, accompanied by Mr. Halliwell, Chief Inspector, Ribble Joint Committee, and was



met by your Inspector and Members of your Council and the Parish Council. Two schemes were then proposed :—No. 1 to cost £85, No. 2 £505.

The smaller scheme was considered unsatisfactory.

No. 2 discharged crude sewage in the River Wyre, here tidal at a spot known as Peg's Pool, this being the only likely available outlet by gravitation, but unfortunately such outlet was considered too near the mussel beds, the latter being somewhat famed for their quality and large size.

The Inspector has at present in hand a further scheme for this township, not yet submitted to your Council.

I trust some scheme may this year be found equally agreeable to your Council and the Parish Council, the County Council, and Local Government Board. It would appear that the time has now arrived when the drainage of this township should be finally settled.

Great Eccleston.—The extension of the sewer in this township is causing some trouble, but this matter will shortly, I feel certain, be finally settled.

The Parish Council are satisfied that the present nuisances must be removed, the point being the best and most economical way of carrying such out, in the present and future interest of the ratepayers. Already a large sum has been expended here in proportion to the population. I believe more than any other township in the Union.

It was undoubtedly a great mistake that the first definite and complete plan was not carried out originally as suggested by your Special Engineer.

The present proposed extension is the outcome of an incomplete scheme, and when carried out in the best possible manner will not produce the same beneficial results as the first scheme suggested, and yet the final expenditure will be much increased. The practical lesson is, what sewage schemes you carry out do such on the most practical and complete lines, and even if only a portion of such scheme is carried out to commence with, a real sound and practical scheme should always be in view, which in the end is undoubtedly the wisest investment and more beneficial to those interested.

### **Tuberculosis.**

This disease must continue to receive your attention, since it is one of the chief causes of death in your district, eight deaths being registered to Phthisis. Two cases only were notified.

This disease uncontrolled, no doubt is infectious in many country houses, and yet under instruction and observation can be checked, if not actually arrested and cured, but with simple instructions in most cases the spreading of the disease can be controlled.

I have often thought that some practical instructions as provided by the Society for Prevention of Consumption, might be supplied to the different Medical Men in your district, and might, with advantage, be used by them for their cases, and even free sputum flasks might also be



supplied by you, especially amongst the poorer class patients.

This would in no way interfere with the private treatment of the Medical Attendant's case and confer incalculable benefits on the infected house.

Sanitorium treatment is not within reach of the poorer class unless you exercise your powers to treat such in small chalets, or send such away for definite treatment in a Sanitorium.

The hospital site purchased by you would, in my opinion, be very suitable for a few revolving "Chalets." This land has a good elevation, is well situated, and of sufficient size to accommodate some Consumptive Chalets, without any possible risk of infection from the inmates of your Infectious Hospital, you propose to erect thereon.

I mention this matter simply in passing, it is a subject that I place before you for your future consideration.

I cannot help feeling that if there was a general voluntary notification of this disease, combined with routine treatment and instructions, with thorough disinfection after death, this disease would become one of the past, especially in Rural Districts.

That a consumptive house is a reality is beyond all doubt, such exist in your district, the disease lurking in them year after year.

The germ delights to live and multiply in badly lighted, illventilated and damp cottages, only waiting there to attack its prey when the suitable medium arrives.

Bearing on this question the Local Government Board have carried out legislation during the past year to provide for notification to the Medical Officer of Health of Sanitary Authorities of Consumptives amongst the Inmates of Poor Law Institutions, and those under the District Medical Officers, and certain definite steps are to be taken in such cases.

This legislation is of an important character, but will not much affect your district as at present constituted, but it will at any rate get at the very poor consumptives amongst whom the disease makes so much progress.

This legislation is to my mind the forerunner of a more important measure to follow, and I believe cannot long be delayed, viz. :—The compulsory notification of this disease.

In my opinion it is only by a complete and general system of notification and treatment that consumption will become under definite control.

It is definitely proved to be a disease of the acquired type, and therefore preventable. Why not use every means possible to prevent this malady, which is undoubtedly the greatest scourge of mankind.

The Third Interim Report of the Royal Commission on Tuberculosis is important.

This report specially deals with Tubercle Bacilli in the milk and excrement of cows, "not showing any signs of disease of the udder during life."

It is beyond all controversy.

"A Tuberculous udder means Tuberculous milk; but the present

investigations go a definite step further.”

The report states that a cow obviously suffering from Tuberculosis apart from udder disease, produces milk containing Tubercle Bacilli. This is very important :—

1.—The milk of a Tuberculous beast obviously suffering from the disease is dangerous to the human subject.

2.—The presence of a Tuberculous beast amongst otherwise healthy stock is definitely dangerous, and this more especially from the excrement ; even in cases of slight Tubercular lesions Tubercle Bacilli are found to be given off in considerable numbers, and those obviously affected in still large numbers.

Showing the very great importance of this subject, the Liverpool Corporation have decided in future to publish the names and addresses of dairy farmers delivering Tuberculous milk to that city ; publication will be so made that any ratepayer may get the information.

No doubt this will be followed by other Borough and Urban Authorities, likely with a far reaching effect on the dairy farmers throughout England,

### **Schools and School Inspection.**

The schools for the most part are sanitary, those not considered so are at present in hand.

With regard to School Inspection I understand the Lancashire Education Committee have approved recommendations as under :—

1.—Two Medical Officers to be appointed to work under the direction of the Superintendent at salaries of £250, rising to £400 per annum.

2.—Four trained nurses to be employed to go to the schools and make all preparations for inspection and to visit the homes of the parents and try to advise them to remedy defects which medical inspection might disclose.

It is proposed to examine the children at the ages of seven, ten, and thirteen.

This is calculated to bring 40,000 children under Medical Inspection annually.

The effect of this work can scarcely be realized if effectually carried out.

It will have a far reaching influence on the rising artisan class of this country and thus confer a benefit on those whose livelihood depends mostly on manual labour.

### **National Conference on Infant Mortality.**

This Conference was held in London and presided over by The Right Hon. John Burns, M.P.

He expressed the opinion that every mother should suckle her child where possible.

Mother's milk was the natural and best food of the young child. I cordially endorse these remarks.



He considered factory work was bad for both mother and child, and equally injurious to the father, and lead to a more or less degenerate offspring.

Mr. Burns expressed a hope that a Milk Bill and a Housing Bill would be passed by Parliament and such would help mothers and children.

He believed in the culture of teachers, and of fathers and mothers who should know that much suffering and disease might be prevented given the right conditions.

Does not this question resolve itself into the early training of the young; especially the girls, the future mothers?

I have always been a strong advocate of training early those who may become future mothers. Why should not domesticity and personal health be subjects taught in our schools here? Lay the foundation in the young and the wise mother will soon instil into her daughter after she leaves school her immediate and future responsibilities. The sooner this is done in my opinion the better.

It is lamentable to see the large numbers of females totally ignorant of their responsibilities and duties yet often encouraged by parents, and often making mistakes of a serious nature, which probably might have been avoided if they had been duly taught the more practical and definite sphere of early womanhood.

In other words the sound intelligent practical mother is likely to produce and bring up one of her own nature and example; let us aim for this end.

The influence of the mother, good or bad, is great on her offspring, let us aim for the good. I have brought this question before you because I am fully convinced, even in such a district as yours, there is much need in the early culture of those who in their aim of life is to get married and produce a race of which we at present are a part.

Mr. Burns thought we required schools for parents, fathers as well as mothers, but is it not wiser to try and train the young tree, then, as a rule, easily bent; but how much more difficult is it to train when its growth and habits are matured and established.

The Public Health "Asset" of the good mother is one which can scarcely be valued.

Your district has many, let us try and get more by early and definite culture of the young.

I hope even legislation may enact some special tuition of our young girls in our schools, which will lay the foundation to produce future wiser and better mothers.

### **Housing of the Working Classes.**

This is becoming year by year a more difficult question in your district.

Many cottages are more or less overcrowded, some old and becoming run out, and yet little prospect of building new ones.

Reform is therefore slow and difficult, and the removal of old cottage dwellings I fear rather increases the difficulties of such a district.



as yours by affording less dwelling accommodation, and therefore the labouring man with his family go to the towns.

The capitalist is not disposed to invest in cottage property. The increased cost of building is such as to prevent expenditure in this direction.

There cannot be any doubt but that there is a general demand for cottages throughout your district, and under such circumstances and where private enterprise fails, two courses are open to you :—

1.—To insist as far as possible to keep the present dwellings in a good sanitary state, both as to the dwelling and its surroundings.

2.—You as an Authority to build houses under Part III. of the Houses and Working Classes Act, 1890.

Personally, I shall be glad to see some dwellings built in your district under the latter Act. I believe the investment would prove sound, land being acquired under favourable conditions.

The first point, that of rendering old and far worn cottages, especially of the thatched type, is alike trying to you and your Inspector by causing more or less constant inspection, and in the end is no remedy, and can only be looked upon as temporary means.

Such, too, entails a constant and likely increasing expenditure to the owner with little return. Of course you have the powers of closure and demolition, but is not the last stage worse than the first? If you, as an Authority, decline to build, and the owner also, by the housing of the “Working Classes Act.” you are practically placed in the same position as the capitalist on this question, and you would be subject to the same Bye Laws, &c., and it would be your duty to take a financial view of the question in the interest of the public, since, if your investment turned out financially unsound, it would affect the rates in an adverse manner.

I commend this subject to your careful thought and consideration, as one materially affecting the present and future condition of your general Rural Area.

During the past year I have only condemned one cottage unfit for human habitation, and that is in the township of Pilling.

### **Legislation.**

You had under consideration the Glander and Farcy Order, as sent by the Board of Agriculture.

### **Small Holdings.**

Your duties and liabilities under the Allotments Acts have been transformed under the Provisions of the Small Holdings Act, 1907, to Parish Councils.

### **Bye Laws.**

You have been granted Urban powers to make Bye Laws relating to New Streets and Buildings for certain townships in your district.

## **Public Health Acts Amendment Act, 1907.**

You received a circular from the Local Government Board calling your attention to the above Act.

The consideration of this circular was deferred by you.

### **Slaughterhouses.**

You were granted certain Urban Powers with regard to Slaughterhouses in your district.

### **Cowsheds and Dairies.**

A circular was issued calling the attention of dairymen to the necessity for Registration under the Dairies, Cowsheds and Milkshops Order, 1888.

A Special Committee has been appointed with discretionary powers to undertake this Order.

### **Notification of Births Act, 1907.**

The County Medical Officer issued a circular concerning the importance of this Act, but you decided not to adopt the same.

### **School Closure.**

An important memorandum on this question was issued by the Local Government Board, and which I have duly considered as affecting your district.

### **Humane Slaughtering of Animals.**

This circular is one of an important character, especially in Urban Districts. It is to be hoped that all butchers are humane in the slaughtering of animals.

1.—To render unconscious an animal before blood is drawn.

2.—No animal awaiting slaughter should be within sight of the slaughterhouse.

3.—The drainage so arranged that no blood or other refuse can flow out within sight of animals awaiting slaughter.

4.—If more than one animal is being slaughtered at the same time they should not be within sight of each other.

I now add the Inspector's Report.

### **To the Garstang Rural District Council.**

Gentlemen,

I have pleasure in handing you my Annual Report of the Sanitary Work done in your District, for the year ended the 31st December, 1908.

**Infectious Diseases.**—Thirty-three cases of Infectious Diseases were reported during the year, all cases were visited forthwith and periodically afterwards. Printed precautions for the prevention of the spread of disease and disinfectants were supplied. Where possible all patients were isolated. After the patients were considered free from infection the houses were disinfected.

**Common Lodging Houses.**—The two Registered Common Lodging Houses in Garstang are regularly inspected and are well kept.



Slaughter-houses.—The 14 Slaughter-houses in your district are regularly inspected, and all were found to be kept very satisfactorily.

Food and Drugs.—No samples of Food and Drugs were taken for analysis in your district.

Canal Boats.—Forty-two inspections of twenty-seven boats were made during the year. There were two infringements of the Acts and Regulations, one boat being dirty and also in a dilapidated condition.

Scavenging.—The scavenging of Garstang is carried out by the Contractor in accordance with his agreement. The scavenging of Calder Vale, which is carried out by your workmen, is satisfactory. As expressed in former years, I think it would be advisable for you to carry out the scavenging of the most congested places in your district.

#### SEWERING.

Scorton, Nether Wyresdale.—A new sewer with Septic Tanks and Bacteria Beds, having Candy & Whitaker's Patent Sprinklers, has been put down to deal with the sewage of the Village of Scorton, in the township of Nether Wyresdale. All houses and outbuildings have been connected.

Bowgreave (North Side), Barnacre-with-Bonds.—The International System of Sewage Works, which were situate in the Workhouse grounds, have been taken up, and the sewage diverted by means of a new sewer about 1100 yards, which empties into the River Wyre, but in such a manner that the sewer mentioned below can be connected with it and conveyed to a portion of land, for which the Council have made arrangements to purchase within ten years, and treat it.

Bonds Sewer, in the Township of Barnacre-with-Bonds.—A new sewer in Bonds Lane and Castle Lane, about 865 yards, has been laid during the year, which at present empties into the River Wyre, but in such a manner that it can be connected with the above. All the above work has been carried out in accordance with plans and sections prepared by me, and by workmen employed by you.

Garstang Sewer.—I have also prepared plans for the treatment of the sewage of Garstang, which empties into the River Wyre, either jointly with the Bowgreave and Bonds sewers, or separately.

Great Ecclestone.—I have prepared five different schemes for dealing with the sewage from two of the three outlets in Great Ecclestone, which at present run for a considerable distance through pasture and meadow land.

Three of the schemes are to connect the two outlets and empty them into a tidal portion of the River Wyre.

The fourth is to join the two outlets and treat it bacteriologically, and the fifth to join the two outlets and run it in open ditches (the present course of one outlet into the River Wyre), fence off the ditches, and provide three water troughs in the fields affected.

Hambleton Sewerage.—I am at present preparing another scheme to try and deal with the sewage of this village.

Sewage Treatment.—The Sewage Treatment Works on the south side of Bowgreave, in the township of Barnacre-with-Bonds, continue to give satisfaction.

The Sewage Works at Scorton, in the township of Nether Wyresdale, was completed in November last, up to the present, so far as I am able to judge, are satisfactory.

Water Supply.—Hambleton.—There are now only six samples of water to be taken in this township from houses near to the Fylde Water Board's mains.

Where samples have been taken and the water has been found unwholesome on analysis, water has been connected or are being dealt with in accordance with the Acts.

Factory and Workshops.—Sixty-six Factories and Workshops have been regularly inspected and all are generally well kept. There were no causes of complaint.



Bakehouses.—Ten Bakehouses were inspected and all of them were well kept. There are no underground bakehouses.

Knackers' Yards.—The two licensed Knackers' Yards in your district are regularly inspected and are cleanly.

Smoke.—No observations as regards the emission of black smoke were made in your district. No legal proceedings were taken.

#### PARTICULARS OF INSPECTIONS, &c.

No. of Inspections made .....	1306
No. of written complaints .....	12
No. of Nuisances abated.....	178
No. of Notices sent .....	64
Dirty Houses ordered to be cleaned.....	3
Common Lodging Houses Inspected .....	2
No. of Houses dealt with as unfit for human habitation ..	1
Removal of Manure improperly deposited.....	8
No. of Workshops inspected .....	66
No. of Bakehouses inspected.....	10
Canal Boats inspected .....	42
No. of Houses disinfected after infectious disease .....	15
No. of Schools disinfected after being closed on account of infectious disease.....	1

#### PLANS.

Plans received for approval .....	21
Plans approved.....	17
Plans not approved .....	4
Representing :—	
New Houses approved.....	8
New Additions to Houses approved.....	6
New Farm and other Buildings approved .....	5
New Houses not approved .....	0
New Additions to Houses not approved .....	1
New Farm Buildings not approved .....	1
Other Buildings not approved .....	1
Houses completed during the year .....	9
Houses in course of erection 31st December, 1908 .....	2
Additions to Houses completed .....	10
Additions to Houses in course of erection, 31st Dec., 1908..	1
New Farm and other Buildings completed .....	6
New Farm and other Buildings in course of erection on 31st December, 1908 .....	1

I am, Gentlemen, your most obedient servant,

JAMES COOK,

Town Hall, Garstang,  
11th February, 1909.

Inspector of Nuisances and  
Sanitary Surveyor.

## Deaths.

In the Garstang Registration District 131 death have been registered. One death has been registered at the Royal Lancaster Infirmary belonging to Winmarleigh.

The deaths during 1908 are :

	Males	Females	
Garstang	29	30	59
Stalmine	22	8	30
St. Michaels	26	17	43
			—
			132
			—

Males 77                      Females 55

Death Rate 12.64              Birth Rate 22.70              Both satisfactory.

Comparing this year with last, there is an increase of five deaths and also an increase of twelve births.

During the past year no deaths have occurred in the Townships of Cleveley and Holleth.

The death rate in the Garstang Registration District is the lowest for the last ten years.

Stalmine Registration District has the same death rate this year as last.

The deaths in St. Michaels Registration District have increased, but 11 are due to old age.

There are eight deaths due to Tuberculosis ; Barnacre has two deaths (one registered in the Union Workhouse), ages 24 and 41 years. Cabus one death, age 30 years. Great Eccleston one death, age 31 years. Hambleton one death, age 41 years. Inskip one death, age 23 years. Myerscough one death, age 28 years. Pilling one death, age 46 years.

The deaths from Phthisis have occurred in seven townships, two cases only have been notified.

## Malignant Diseases.

In the Garstang Registration District there are three deaths from Malignant Diseases.

In the Stalmine Registration District there are no deaths from Malignant Diseases.

In St. Michaels Registration District there is one death from Malignant Disease.

The deaths from Malignant Diseases have occurred in the following townships :—Claughton one death, age 49 years ; Nateby one, age 51 years ; Bonds one, age 64 years ; Out Rawcliffe one, age 75 years.

Comparing this year with last, there is a decrease of four in the deaths from Malignant Diseases.

Hambleton, Inskip and Great Eccleston have the three highest death rates, the increase in these townships being due to a good many deaths from old age.

**Births.**

	Males	Females	
Garstang	65	57	122
Stalmine	25	22	47
St. Michaels	27	41	68
	<hr/> 117	<hr/> 120	Total <hr/> 237

Comparing this year with last, there is an increase of 12 births.  
Garstang Registration District, increase of 19 births.

Stalmine            "            "       decrease of 22    "

St. Michaels       "            "       increase of 15    "

The deaths recorded under one year are 20, four more than last year.

The deaths under one year have occurred in the following townships:—Barnacre two deaths, premature birth 30 hours, and congenital malformation of throat, 22 hours. Claughton one death, 3 weeks, Marasmus. Catterall one death, 4 months, Broncho Pneumonia. Forton two deaths, 3 months, Dentition, and two weeks, Debility from birth. Inskip one death, premature birth, 4 hours. Great Eccleston one death, Convulsions, 4 days. Myerscough two deaths, Broncho Pneumonia, 10 months, and Premature Birth 1 hour. Nateby one death, 9 days, death due to bleeding from the umbilical cord. Out Rawcliffe one death, Broncho Pneumonia, 5 months. Pilling four deaths, Premature Births, 2 days, 4 days, and 4 days, Gastro Enteritis 13 days. Stalmine three deaths, Premature Births, 17 hours and 1 hour, Enteritis 11 months.

**Notified Cases.**

Diphtheria .....	13
Enteric.....	9
Erysipelas .....	1
Scarlet Fever .....	9
Variola .....	1

Total... 

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33

Deaths from the notified cases—Scarlet Fever and Complications, two deaths, ages 8 and 6 years. Enteric one death, age 63.

One death from Smallpox. The death took place in the Kirkham District, the patient was a temporary resident at the Common Lodging House, Garstang.

Garstang Registration District .....	23
Stalmine           "            " .....	3
St. Michaels       "            " .....	7
	<hr/> 33



According to the record of notified cases there is a decrease of 11 cases this year.

The Townships infected were:—Bonds, Enteric, one case. Claughton, Enteric, one, Scarlet Fever, four. Catterall, Enteric, one. Calder Vale, Enteric, one. Scorton, Scarlet Fever, two. Garstang, Diphtheria, six, Scarlet Fever, one, Enteric, one, Erysipelas, one, Variola, one.

This, with the various Tables attached, concludes my report and I again beg to thank you for the continued interest you show in the general sanitary well-being of your district.

I am,

Yours obediently,

THOMAS FISHER.

February 23rd, 1909.

# Garstang Rural District Council.

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Smallpox, Cholera, Diphtheria, Membranous Croup,  
Erysipelas, and the following Fevers:—  
Scarlet (also called Scarlatina), Typhus, Typhoid or  
Enteric, Continued, Relapsing, and Peurperal.

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## Caution to Householders

Against the Commission of Acts by which Infectious  
Disease may be spread.

ISSUED BY ORDER OF THE HEALTH COMMITTEE.

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### NOTICE IS HEREBY GIVEN

*That the Public Health Act, 1875 and the Infectious Disease (Prevention) Act 1890 render liable to penalties persons who may commit any offence which may tend to cause the spread of infectious disease (including the above-mentioned diseases) and proceedings will be taken in all cases where an offence has been committed.*

The Public Health Act 1875 provides that :—

1.—Any person who—

(a) while suffering from any dangerous infectious disorder wilfully exposes him-self without proper precautions against spreading the said disorder, in any street, public place, shop, inn, or public conveyance, or enters any public conveyance without previously notifying to the owner, conductor, or driver thereof that he is so suffering ; or

(b) Being in charge of any person so suffering, so exposes such sufferer : or

(c) Gives, lends, sells, transmits, or EXPOSES, without previous disinfection, any bedding, CLOTHING, rags, or other things WHICH HAVE BEEN EXPOSED TO INFECTION from any such disorder

Shall be liable to a penalty not exceeding £5 ; and a person who, while suffering from any such disorder, enters any public conveyance without previously notifying to the owner or driver

that he is so suffering, shall in addition be ordered by the Court to pay such owner and driver the amount of any loss and expense they may incur in carrying into effect the provisions of this Act with respect to disinfection of the conveyance.

2.—Any person who knowingly lets for hire any house, room, or part of a house in which any person has been suffering from any dangerous infectious disorder, without having such house, room, or part of a house, and all articles therein liable to retain infection, disinfected to the satisfaction of a legally qualified medical practitioner, as testified by a certificate signed by him, shall be liable to a penalty not exceeding £20.

3.—Any person letting for hire or showing for the purpose of letting for hire any house or part of a house who, on being questioned by any person negotiating for the hire of such house or part of a house as to the fact of there being or within six weeks previously having been therein any person suffering from any dangerous infectious disorder, knowingly makes a false answer to such question, shall be liable at the discretion of the Court to a penalty not exceeding £20, or to imprisonment with or without hard labour for a period not exceeding one month.

The Infectious Disease (Prevention) Act, 1890, provides :

4.—No person without the sanction in writing of the Medical Officer of Health or of a registered medical practitioner, shall retain unburied elsewhere than in a public mortuary or in a room not used at the time as a dwelling place, sleeping place or workroom, for more than forty-eight hours, the body of any person who has died of any infectious disease.

5.—Any person who shall knowingly cast, or cause, or permit to be cast, into any ashpit or similar receptacle, any infectious rubbish without previous disinfection is liable to a penalty.

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## SUGGESTIONS

For preventing the spread of Infectious Disease.

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In order to prevent disease and suffering, the Health Committee appeals to the parents and attendants of patients suffering from Infectious Disease to observe the following instructions ;

### 1.—Isolate the Sick—

The patient should be at once separated from the other inmates of the house, and, if possible, placed in a top room and have that floor devoted to himself and his attendant.

All bed curtains and other hangings, carpets, rugs, and all articles of dress and the like in wardrobes and cupboards and all unnecessary articles of furniture should be removed.



## **2.—Ventilate Sickroom and House**

The room should be kept well ventilated, windows should be kept partly open (the patient being protected from draughts by a screen when necessary), communication with the chimney should be kept free and, weather permitting, a fire should be kept burning. The floor should be sprinkled with disinfecting fluid and cleansed daily.

## **3.—Place Antiseptic Sheet outside Sickroom door—**

The door should be kept closed and a sheet kept wet with Izal, Sanitas, or other disinfectants, should be hung outside so as to cover every crevice.

## **4.—Disinfect all Discharges from Patient—**

Everything that passes from the patient (sputum, vomit, urine, faeces) should be received in vessels containing a disinfectant, and an additional quantity of the disinfectant should be added to the vessel BEFORE removing it from the room. All food and drink not used should be mixed with disinfectant and should not, under any circumstances, be partaken of by other persons.

In TYPHOID FEVER the pail supplied MUST be used for the reception of all slops, &c., referred to in the foregoing.

## **5.—Do not use Handkerchiefs—**

In Diphtheria and Phthisis, pieces of rag should be used for sputum and discharges from the nose and mouth and should be immediately burnt.

## **6.—Disinfect all Utensils—**

All cups, glasses, spoons or such like articles used in the sick room should be placed in disinfectant solution before being removed therefrom and they should be subsequently washed in hot water.

## **7.—Disinfect Patient's Linen—**

All bed and body linen after use should be at once, before being removed from the room, put into the disinfectant solution and after remaining in this for at least an hour may be washed. At the termination of the illness the premises will be thoroughly disinfected under the direction of the Sanitary Staff.

## **8.—Keep Surroundings Clean—**

The patient's body and bed should be kept scrupulously clean, and when during the progress of Scarlet Fever or Small Pox, scales or crusts form on the skin, their diffusion should be prevented by smearing the body from head to foot with oil (Carbolic, Sanitas, or Eucalyptus). The house should be well ventilated and kept very clean; all sinks, water closets, traps and gullies should be in good order and have Izal or other disinfectant poured into them daily.

## **9.—Nursing Arrangements—**

Nurses or others in attendance should wear overalls or dresses of washable material; they should keep their hands clean, adding Izal, Sanitas, or Condyl's Fluid to the water in which they wash. They should remain with the patient, but, if compelled to leave the room, they should leave the overall or apron behind. They should not mix with the other members of the household.

## **10.—Visitors should not be received.**

## **11.—Vaccination—**


In cases of Small Pox all the members of the household should be vaccinated.

## **12.—Observe Precautions during Convalescence**

The patient must not be allowed to mix with the other members of the household until—in Scarlet Fever—all “peeling” of skin and all discharges from the ears and nose have ceased; in Diphtheria—all discharges have ceased; in Small Pox—all scabs have fallen off. The patient must be thoroughly cleansed by the use of a warm bath containing Izal or other disinfectant and his removal from the room must be sanctioned by the medical practitioner. Clothes used during the illness or in any way exposed to infection must not be worn again or put away in drawers or wardrobes until they have been properly disinfected.

## **13.—Final Disinfection—**

When the sickness has terminated, the room and its contents should be disinfected. This work will be carried out by the Sanitary Staff.

 Householders are hereby notified that when SCARLET FEVER patients are treated at home, disinfection of bedding, premises, &c., cannot be carried out till the expiration of at least SIX WEEKS from the commencement of the last case of such illness in the house.

## **14.—Special Precautions in case of Death—**

Should death occur, the body must, as soon as possible, be placed in a coffin which should be, at once, screwed down; the funeral must take place within forty-eight hours of death. Mourners should not meet in the room in which death took place.

Izal and other disinfectants can be obtained *free of cost* on application at the Town Hall, and the disinfection of rooms will be carried out free of cost. Rooms which have been occupied by a person who has died of Phthisis (Consumption) should be disinfected.

By order of the Committee,

THOMAS FISHER.

Medical Officer of Health.



Table 1. Vital Statistics of Whole District during 1908 and Previous Years.

Year.	Population estimated to Middle of each Year. 2	Births.		Total Deaths Registered in the District.			Total Deaths in Public Institu- tions in the District. 9	Deaths of Non-resi- dents regis- tered in Public Insti- tutions in the District. 10	Deaths of Residents registered in Public Insti- tutions beyond the District. 11	Nett Deaths at all Ages belong- ing to District.	
		Number 3	Rate * 4	Under 1 Year of Age.		At all Ages.					
				Number 5	Rate per 1000 Births registered. 6						Number 7
1											
1898	12151	254	20.90	29	114.1	158	13.03			158	13.03
1899	12151	303	24.9	23	75.9	171	14.07			171	14.07
1900	12500	243	19.44	19	78.14	166	13.28			166	13.28
1901	12500	248	23.76	18	72.58	122	11.69			122	11.69
1902	10436	251	24.05	17	67.72	139	13.31			139	13.31
1903	10436	268	25.68	19	71.03	144	13.79			144	13.79
1904	10436	220	24.08	26	59.9	139	13.31			139	13.31
1905	10436	221	21.17	17	76.9	121	11.59	4		121	11.59
1906	10436	240	22.99	14	58.33	138	13.22	5	1	132	12.64
1907	10436	225	21.55	16	71.1	125	11.79	2	2	127	12.16
Aver- ages for years 1898-											
1907	11191.8	247.3	22.3	19.8	74.1	142.3	12.5			141.9	12.5
1908	10436	237	22.70	20	84.38	131	12.55	4	1	132	12.64

\* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

Area of District in acres }  
(exclusively of area } 57,151  
covered by water)

Total population at all ages, 10436, at Census of 1901



Table 2. Vital Statistics of separate Localities in 1908 and previous years.

Names of Localities.	GARSTANG.				STALMINE.				ST. MICHAEL'S.			
	Population esti- mated to middle of each Year.	Births registered.	Deaths at all ages.	Deaths under 1 year	Population esti- mated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year	Population esti- mated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year
1898	a 6134	b 114	c 73	d 8	a 3245	b 85	c 55	d 15	a 2772	b 55	c 30	d 6
1899		126	90	12		111	40	8		66	41	3
1900		111	80	11		67	38	4		65	48	4
1901	5311	128	71	12	2265	58	21	2	2860	62	30	4
1902	5311	133	72	7	2265	56	28	2	2860	62	39	8
1903	5311	139	76	10	2265	68	31	Nil	2860	61	37	9
1904	5311	102	75	16	2265	54	24	6	2860	64	40	4
1905	5311	113	69	9	2265	50	23	3	2860	58	29	5
1906	5311	111	61	8	2265	65	35	1	2860	64	36	5
1907	5311	103	68	9	2265	69	30	2	2860	53	29	5
Average of Years 1898 to 1907		118.0	73.5	10.2		68.3	32.5	4.3		61.0	35.9	5.3
1908	5311	122	59	8	2265	47	30	8	2860	68	43	4

Table 3. Cases of Infectious Disease notified during the year 1908.

Notifiable Disease.	Cases Notified in Whole District.						
	At all Ages.	At Ages—Years.					65 and upwards,
		Under 1	1 to 5	5 to 15	15 to 25	25 to 65	
Smallpox .....	1				1		
Diphtheria.....	13			9	3	1	
Erysipelas .....	1					1	
Scarlet Fever .....	9		3	4	2		
Enteric Fever .....	9			1	3	4	1
Totals .....	33		3	14	9	6	1

Garstang, 23. Stalmine, 3. St. Michael's, 7.  
Isolation Hospital,—Nil, except Elswick Smallpox (Conjoint),

Table 4. Causes of, and Ages at, Death during year 1908.

Causes of Death.	Deaths at the subjoined ages of "Residents" whether occurring in or beyond the District.						
	All ages.	Under year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.
Scarlet Fever .. .. .	2			2			
Whooping Cough .. .. .	1		1				
Enteric .. .. .	1					1	
Epidemic Influenza.. .. .	3				1	2	
Enteritis .. .. .	3	2					1
Phthisis (Pulm. Tuberculosis)	8				2	6	
Cancer, malignant disease ..	4					3	1
Bronchitis .. .. .	4					1	3
Pneumonia .. .. .	14	3				5	6
Other Diseases of Respiratory organs.. .. .	1				1		
Premature birth .. .. .	9	9					
Heart diseases .. .. .	21					11	10
Accidents .. .. .	2					2	
Suicides .. .. .	1					1	
All other causes .. .. .	58	6	4	2	2	14	30
All causes .. .. .	132	20	5	4	6	46	51



Table 5. INFANTILE MORTALITY DURING THE YEAR 1908.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.		Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 1 Month	3-4 months	4-5 months	5-6 months	10-11 months	11-12 months	Total Deaths under One Year.
All Causes	Certified	10	2	2	1	15						
	Uncertified											
Enteritis	...											
Premature Birth	...	8	1	1		1						
Congenital Defects	...	1				9						
Atrophy, Debility, Marasmus...	...					1						
Convulsions	...	1			1	2						
Pneumonia	...					1						
Other Causes	...		1			1	1	1	1	1	1	
		10	2	2	1	15	1	1	1	1	1	20

Births in the year	{	legitimate	.....237	Population, Estimated to middle of 1908...10,436
		illegitimate.....12		Deaths in the year of legitimate infants...20
			Deaths from all Causes at all Ages...132	

## Factories, Workshops, Laundries, Workplaces &amp; Homework

## 1. INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of Nuisances.

Premises.	Number of Inspections.
Factories (Including Factory Laundries) .. .. .	
Workshops (Including Workshop Laundries) .. .. .	66
Workplaces .. .. .	Nil
Homeworkers' Premises .. .. .	Nil
TOTAL .. .. .	66

## 2. DEFECTS FOUND.

Particulars.	Number of Defects.	
	Found.	Remedied.
Nuisances under the Public Health Acts:—		
Want of cleanliness.. .. .	Generally well kept.	
Want of Ventilation .. .. .		
Overcrowding .. .. .	No causes for complaints.	
Want of drainage of floors .. .. .		
Other nuisances .. .. .		
Total .. .. .		

## 5. OTHER MATTERS.

Class.	Number.
Matters notified to H.M. Inspectors of Factories:—	
Failure to affix Abstract of the Factory and Workshop Act (S. 133) .. .. .	
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory Act (S. 5)	Notified by H.M. Inspector
Factories .. .. .	
Workshops .. .. .	
Bakehouses .. .. .	
IntaTm onber of workshops on register ..	

Chief Sanitary requirements of District .....	} Drainage and Water Supply, Pilling and Hambleton. Drainage Extension, Great Eccleston.



